



RehabCare Settlement Administrator
P.O. BOX 404001
Louisville, KY 40233-4001

Claim Number: RHR-10005887-6



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NORTH CAROLINA STATE VETERANS
NURSING HOME
214 COCHRAN AVE
FAYETTEVILLE NC 28301-3875

RehabCare Settlement
c/o KCC Class Action Services
PO Box 404000
Louisville, KY 40233
www.rehabcaresettlement.com
October 22, 2018

Re: **Dakota Medical v. RehabCare Group, Inc., Class Action Settlement**

Dear Class Member,

Enclosed please find a check in the amount of \$599.99 representing an additional payment in the Dakota Medical v. RehabCare Group, Inc. class action settlement.

Please cash this check no later than February 19, 2019. It will be void after that date.

Please note that your initial eligible payment amount was \$1,358.12, but because we did not receive a valid tax identification number from you, your payment this year is limited to \$599.99 (you also received \$599.99 in 2017). To ensure that you receive your remaining eligible amount, please return the enclosed form with your tax identification number or visit www.rehabcaresettlement.com and submit a completed and accurate W9 submission using Claim ID: 10005887 and Access Code: 621370.

If you have any questions about potential tax issues, we recommend that you consult a professional tax consultant. Neither Class Counsel, Defense Counsel nor the Settlement Administrator can provide you with any tax advice.

Sincerely,
Settlement Administrator

RehabCare Settlement Administrator
P.O. BOX 404001
Louisville, KY 40233-4001

Bank of the West

90-78/1211

Check No.
308751

PAY *****Five Hundred Ninety Nine Dollars and 99/100 *****

Date: 10/22/2018

Pay Amount: \$599.99

TO THE
ORDER OF

NORTH CAROLINA STATE VETERANS
NURSING HOME
214 COCHRAN AVE
FAYETTEVILLE NC 28301-3875

Claim #: RHR-10005887-6

VOID AFTER February 19, 2019



[Signature]

000308751 121100782 051277226

2062037

2062037

RECEIPT

DATE

No.

RECEIVED FROM

\$ 579.77

DOLLARS

☐ FOR RENT
☐ FOR

ACCOUNT	
PAYMENT	
BAL DUE	

☐ CASH
☐ CHECK
☐ MONEY ORDER
☐ CREDIT CARD

FROM TO

BY

RECEIPT

DATE

No.

RECEIVED FROM

\$

DOLLARS

☐ FOR RENT
☐ FOR

ACCOUNT	
PAYMENT	
BAL DUE	

☐ CASH
☒ CHECK
☐ MONEY ORDER
☐ CREDIT CARD

FROM TO

BY

Approved for deposit by
General Counsel